

## CORRESPONDENCE

### Subject of Following Letters: Reports by Health Officers of Long Beach and Los Angeles on Medical Service in the Recent Southern California Earthquake.

Department of Health  
City of Long Beach

*To the Editor:*—Your favor of the 17th inst. just came to my attention, and this being Sunday I have no stenographer at work and will have to answer in longhand.

The State Board of Health and their representatives have and are still rendering invaluable service to us in the stricken area. They are functioning 100 per cent, and we are hoping the State Board will let them remain as long as there is any necessity for their services.

I can find no words to express our appreciation of the valuable service the State Health Board representatives are rendering.

G. E. McDONALD, M. D.,  
Health Officer, City of Long Beach.

Department of Health  
City of Los Angeles

*To the Editor:*—Answering your inquiry of March 17, I am happy to state that Dr. Giles S. Porter, the State Health Officer, his assistant, Dr. Telfer, Mr. Ross, Chief Sanitary Inspector, and Sanitary Engineer, Mr. Gillespie, and Mr. Harmon, all of the State Health Department, gave valued assistance and advice in handling the emergency conditions in the devastated area. Mr. Ross continued in active direction of sanitary inspection from the time he reported on Saturday, March 11. My own and other health departments who contributed sanitary personnel placed them under control of Mr. Ross.

The Emergency Committee that was appointed designated Mr. C. S. Henderson as director of relief in the devastated area. Mr. Henderson appointed me as director or coördinator of emergency medical relief. He appointed Doctor Porter, coördinator of public health. This latter appointment perhaps was superfluous, as it was well within the legal powers of state health officer. Colonel O. C. Wyman, a quartermaster officer of this city, was made director or coördinator of food supplies. These several responsibilities delegated by Mr. Henderson enabled us to work in complete coöperation and, I believe, contributed much to the orderly program of relief that was carried on through the week's emergency. I cannot speak too highly of all those who contributed so generously to my division of medical relief. More than two hundred doctors reported, coming from as far as Santa Barbara, San Bernardino, and San Diego. We had on duty daily a little less than one hundred physicians at the fourteen relief stations and the two hospitals in Long Beach City. Although more than six hundred nurses volunteered, approximately two hundred were on duty daily. I am proud of the way the medical and nursing professions came to the aid of the people in the stricken area.

C. W. DECKER,  
Health Officer, City of Los Angeles.

### Subject of the Following Letter: Misrepresentation by an Insurance Solicitor.

*To the Editor:*—A man representing himself as J. F. Anderson, but whose true name we have since learned is Fred Hernbloom, and who has another alias, J. F. Palmer, procured some of our literature and specializes in calling on doctors.

It has been reported to us that he has procured considerable money from doctors and dentists on applications for life insurance. No applications for life insurance are received by us, and the only way we have learned of his practice is through complaints being made to our home office or to my office. He is operating in Southern California.

I went to Los Angeles and spent considerable time there trying to find him. I reported the facts to the Life Underwriters' Association in Los Angeles, to the Better Business Bureau, who made notations and stated they would communicate the facts to their membership, and also to the Los Angeles Police Department through Mr. T. J. Ryan of the Bunko Detail, who will be on the lookout for this man. I contacted the Medical Association in Los Angeles, and they are publishing a warning in their bulletin.

It was suggested by doctors in Los Angeles that you publish a warning through your publication here in San Francisco, warning all doctors and dentists to be on the lookout for this man and under no circumstances to pay any money to anyone without his showing to them that he is authorized by the State of California to write life insurance; in other words, to practice the business of a life insurance underwriter.

This man has no license to represent any life insurance company in California. He never has had a license or contract to represent the Guarantee Mutual in California.

G. G. RIPLEY,  
1114 Russ Building.  
San Francisco.

### Subject of Following Letter: The Majority and Minority Reports on the "Final Report of the Committee on the Costs of Medical Care."

*To the Editor:*—The University of Chicago Press has recently published the report of the Committee on the Costs of Medical Care, under the title of "Medical Care for the American People." The price is \$2. In many medical journals, I have noticed comments on the committee's report, but with little reference to the minority report. In the volume referred to, the minority report is given in full and is so wise and so reasonable that anyone interested in the subject should read it. The *Journal of the American Medical Association* and *CALIFORNIA AND WESTERN MEDICINE* in its December number printed excerpts. The minority report gives the most conclusive refutation I have seen of the assumed facts and of the fallacies of the majority report. It should appeal to all except professional socialists. Indeed, the basis of the majority report seems to be the spirit of socialism rampant in our universities. The adoption of the recommendations of the majority report by the profession would be an entering wedge to state socialism. I wish to emphasize the advisability of a perusal of this volume by all California Medical Association members who are interested in these matters.

JOHN C. KING.

EDITOR'S NOTE.—The above letter is from Dr. John C. King, formerly in practice in Banning, now retired and living at Pasadena. Doctor King was president of the California Medical Association in 1910-1911. Summaries of the reports above referred to were printed in the December, 1932, *CALIFORNIA AND WESTERN MEDICINE*, pages 395-400. County societies and interested members were urged to purchase the Final Report, the following footnote being appended:

Publication 28: "The Final Report of the Committee on Costs of Medical Care" may be purchased from the University of Chicago Press, Chicago, Illinois. Price, \$1.50.

## MUSSEL AND CLAM POISONING IN CALIFORNIA

In 1930 there was but one case of mussel poisoning reported in California and in 1931 but two cases. In 1932 forty-two cases of the disease were reported. This is distinctly at variance with the preceding year 1929, when fifty-five cases occurred. In 1927, an outbreak of more than one hundred cases, with several deaths, constituted almost a catastrophe. Each year, in fact, since 1927 the California Board of Public Health has established a quarantine on mussels during the summer months, when these shellfish are toxic. Recently a similar quarantine has been placed upon clams because of the toxic condition that has been discovered in them. Through the coöperation of Dr. K. F. Meyer, director of the Hooper Foundation for

Medical Research, investigations into clam and mussel poisoning have been carried on each year. It has been determined that these shellfish become toxic during the spring months, reaching a high state of toxicity during midsummer and becoming nontoxic during the winter months. There is a variation in the time at which the peak of toxicity is reached, but it generally occurs about the middle of July. The quarantine area covers the coastal district from Monterey County to the Klamath River in Del Norte County. Within this area the sale or offering for sale of clams and mussels is prohibited during the summer season, the quarantine each year terminating September 30.

While few cases were reported in 1930 and 1931, laboratory tests performed during both of these years showed a remarkable toxicity to animals. During the season of 1932, the concentration of poison injurious for consumption by human beings was determined for the first time with sufficient certainty. A discovery of the Hooper Foundation for Medical Research, however, proving the value of bicarbonate of soda in the prevention of mussel poisoning, promises to have a distinct effect in shortening the quarantine period to cover only the time when the highest toxicity prevails. It has been determined that the addition of one-quarter ounce of bicarbonate of soda to each quart of water in which shellfish are cooked destroys 85 per cent of the poison when the cooking process is continued for twenty to thirty minutes. This procedure does not grant complete protection, but it provides partial protection. The coagulating protein substances retain about 15 per cent of the poison in the tissue of the shellfish, which is only delivered by digestion in the stomach.

It would seem that if this method of cooking mussels becomes universal, quarantine measures may be restricted greatly. It has developed, also, that while clams may be just as toxic as mussels, fewer cases of poisoning occur in human beings who eat clams for the reason that the intestines of the clams are generally discarded. The clam being larger, the intestines can be removed more easily than in the smaller mussels. Since most of the poison is found in the intestines of the shellfish, it is obvious that clam poisoning for this reason is not of as frequent occurrence. As a result of these discoveries it becomes apparent that if mussels are properly cooked with bicarbonate of soda and if the intestines of clams are always removed and the remainder thoroughly cleaned, it is possible that the danger of shellfish poisoning on the Pacific Coast could be reduced greatly, if not entirely eliminated.

## MEDICINAL LIQUOR—FEDERAL LEGISLATION

**Liquor Bill Approved.**—One of the major recommendations of the Wickersham Commission and the objective of a prolonged campaign by the medical profession became an actuality on March 30 when the House approved, 153 to 59, the Copeland-Celler bill removing restrictions from medicinal use of vinous and spirituous liquors.

The measure does not actually "lift the lid" on prescription of wines, whiskies, and other alcoholic beverages as medicinal remedies, and close governmental supervision will be continued to prevent abuses.

Drafting of new regulations for medicinal liquor has been started, but officials declined to state the nature of restrictions under consideration.

The effect of the measure is to remove present statutory limitations which prevent physicians prescribing more than one pint of liquor every ten days for a patient or to give more than one hundred prescriptions every three months.

Fearing that the new law will be misunderstood and its provisions abused, the American Medical Association, in expressing gratification over passage of the bill, disclosed its desire that "safeguards" be continued to prevent abuse of the greater freedom granted medical men.—Los Angeles *Times*.

**Medicinal Liquor Law Signed by Roosevelt.**—On March 30 President Roosevelt signed the Copeland-Celler medicinal liquor bill removing restrictions on the amount doctors may prescribe.

The bill accomplishes three main things—allows patients to obtain whatever liquor is medicinally necessary; insures patients secrecy concerning their ailments; and, by simplifying prescriptions, saves the government \$110,000 annually.

The only limitation upon doctors is that "no more liquor shall be prescribed to any person than is necessary to supply his medicinal needs."—Los Angeles *Herald-Express*.

**Doctor's Dilemma Ended.**—In removing the restrictions on the amount of liquor physicians may prescribe for medicinal purposes Congress not only cancels a long-standing insult to the medical profession, but absolves itself from the charge of practicing medicine without a license and without the necessary educational qualifications. No longer will it stand between the doctor and his patient and say what may and may not be done to save the patient's life. It was a false position in that it permitted congressmen to deny a sick man or woman what they did not think of denying themselves. Another bit of Volsteadian humbug has been abandoned.—Editorial in Los Angeles *Examiner*.

## BOTULISM DANGER IN HOME-CANNED PRODUCTS

At this season of the year housewives are drawing heavily upon stocks of canned goods to supply the family table and, if home-canned vegetables that have not been packed properly are eaten, there is a grave danger of contracting botulism—a severe and often fatal disease. Recently six cases of this disease, all of which were probably due to the use of home-canned products, have been reported in California.

Unless the housewife uses a pressure cooker for canning vegetables in the home, she is not able to cook the products at a sufficiently high temperature and with sufficient heat penetration to sterilize the entire contents of the containers.

The organism that causes botulism occurs in the soil and it is extremely resistant. It belongs to a group of organisms which may thrive in the absence of light and air. Most common pathogenic organisms require opposite conditions for their growth, but the botulinus bacillus is not one of these. Powerful poisons are developed in the process of growth and if taken even in the most minute quantity they may cause death.

Strange to relate, improperly home-packed vegetables may show no signs of spoilage but nevertheless they may harbor this deadly poison. To be safe, vegetables canned by ordinary methods in the home should be thoroughly boiled after removal from the can, for at least thirty minutes before serving. This will generally destroy the poison, but it is safer to eat commercially packed products or those which have been cooked in a pressure cooker in the home.

Commercial canners of vegetable and meat products are required to heat such products at specified high temperatures and for required lengths of time under regulations enforced by the California Department of Public Health. Since the enforcement of these regulations began in 1925, no cases of botulism have occurred from the use of products packed commercially in California.

The whole matter of prevention in this case rests upon the application of high temperatures and with heat penetration to the entire contents of the can. Unfortunately, the housewife generally lacks the machinery necessary in this process and in her sincere efforts to conserve the family food supply fatal results not infrequently follow.